## PART B - FEE(S) TRANSMITTAL

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indicated unless corrected maintenance fee notificatio	below or directed other	erwise in Block I, by (a		pondence address; and		arate "FEE ADDRESS" for
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FINNEGAN, HENDERSON, FARABOW, GARRETT & DUNNERberedy certify that this Fe(s)? Transmittal is bring deposited with the Lin LLP  LLP 901 NEW YORK AVENUE, NW  ### AVENUE AND THE ADDRESS OF						
WASHINGTON,	DC 20001-4413		Г	(Depositor's name)		
			Ī.			(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	A	TTORNEY DOCKET NO.	CONFIRMATION NO.
10/531,257 11/18/2005		Robert J. Pruett			07810.0119-00	4840
TITLE OF INVENTION: FINE PLATY KAGLIN COMPOSITION						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI		
nonprovisional	NO	\$1510	\$300	\$0	\$1810	10/12/2010
EXAMIN	ŒR	ART UNIT	CLASS-SUBCLASS	]		
ABU ALI, SHUANGYI		1793	106-484000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.530.)  Change of correspondence address (or Change of Correspondence Address (or Change of Correspondence Address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/12 Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For prating on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (thewing us a member at 0.2 registered patent attorneys or agents. If no name is limited, no name with the printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (prior or type) PLEASE NOTIC Lines an assigne is identified below, the abcument has been filed for coordation as set forth in 37 CFR 3.11. Completion of this form in NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
IMERYS PI	GMENTS, INC.		ROSWELL,	GEORGIA		
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) ar  It issue Fee  Publication Fee (No	small entity discount p		b. Psyment of Fee(s): (Please first reapply any previously paid issue fee shown above) □ A check is enclosed. ☑ Psyment by could card. Form PTO-2038 is attached. ☑ The Director is bearby substricted to charge TO CARTEST CONTINUES. ☑ The Director is bearby substricted to charge TO CARTEST CONTINUES. ☑ The Director is bearby substricted to charge TO CARTEST CONTINUES. ☑ The Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the form. In the Director is bearby substricted to the property of the p			
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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Authorized Signature Communication Date August 30, 2010						
Typed or printed name Christopher T. Kent Registration No. 48,216						
This collection of information is required by 3T CFR 1.311. The information is required to obtain or testan a baseful by the public which is to 18c (and by the 18FPIO process a application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.41 fms collection as estimated to take 12 mantles to complete camplication form to the USFTO. Time will vary depending upon the adividual case. Any comments on the amount of time your crigarine, an submitting the completed application form to the USFTO. Time will vary depending upon the adividual case. Any comments on the amount of time your crigarine complete this form and/or suggestion for rectaining this burden, which the ment to the Chief Information Office, 1.5 Patient 80.0 Patients of the complete complete the property of the Chief Information Office, 1.5 Patient 80.0 Patients (P.O. Box 1450 Alexandria, Virginia 22315-1451). 1493. DO NOT SEXD PERSS OR COMPUTED FORMS 10 YHIS ADDRESS. SEXD TO: Commissioner for Patients, P.O. Box 1450 Alexandria, Virginia 22315-1451.						